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**EXAMINER** 



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SECRETARY OF STATE

## **COVER LETTER**

TO: Registratio Division of	n Section Corporations
SUBJECT:	Advantage Business Consulting Group, LLC
	Name of Limited Liability Company
The enclosed Article	s of Amendment and fee(s) are submitted for filing.
Please return all corr	espondence concerning this matter to the following:
	Maribel Solano
	Name of Person
	Firm/Company
	8211 Sw 170 Terrace
	Address
	Palmetto Bay, FL 33157  City/State and Zip Code
	maribelsolano9@aol.com
	E-mail address: (to be used for future annual report notification)
For further informati	on concerning this matter, please call:
	ne of Person at ( 305 ) 807-0774  Area Code & Daytime Telephone Number
Enclosed is a check t	For the following amount:
\$25.00 Filing Fee	Solution Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  Solution Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ADVANTAGE BU	SINESS CONSOLATO Liability Company as it now apper Florida Limited Liability Company)	& GRAP, A	12c.	
(Name of the Limited (A	<b>Liability Company as it now appe</b> Florida Limited Liability Company)	ars on our records.)		
The Articles of Organization for this Limited Lia	ability Company were filed on	03/05/2010	and assigned	
Florida document number 27-21236	30			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability company he	ere:		
The new name must be distinguishable and end with	she would "Limited Linkility Com	any " the decignation "	I I C" or the abbreviation	
L.L.C."	i the words Limited Liability Comp	bany, the designation	LLC of the application	
Enter new principal offices address, if applica	ıble:			
Principal office address MUST BE A STREE	T ADDRESS)		Fig. 5	
			2 2 Z	
Enter new mailing address, if applicable:			e e m	
(Mailing address MAY BE A POST OFFICE BOX)			- N N D	
		· · · · · · · · · · · · · · · · · · ·		
	<del></del>	<del> </del>	<b>5</b>	
B. If amending the registered agent and/oregistered agent and/or the new registered off		our records, enter	the name of the new	
	*:.			
Name of New Registered Agent:	Maribel Solano			
New Registered Office Address:	8211 Sw 170 Terrace	1 77 1		
Enter Florida street address				
	Palmetto Bay	, Florida	33157	
	City		Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, Thereby confirm that the limited liability company has been notified in writing of this change.

Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Maribel Solano	8211 sw 170 terrace	Add
		Palmetto Bay, FI 33157	Remove
	·		Add Remove
			Add Remove
			Add Remove
			∏Add
<del></del>			Remove
			Add Remove
D. If amend	ling any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary.)	
<del></del>			
Dated	August 24th	2010	<del>-</del> -
	Signature of a mer	mber or new marzed representative of a member	····
		Jose A. Solano Sr.	
	Ту	ped or printed name of signee	